

# MOLDOVA 10



# Participant Application

**Please fill out the following application and return it with a deposit of £100 Pounds by March 31st to Kyle McKinnon at this address.**

**Reign Ministries  
36 Scampton Close  
Bicester, OX26 4FF**

# MOLDOVA 10



**1) Title: Mr / Miss / Mrs / Rev / Other:**  
**First Name**  
**Other Names:**  
**Family Name**

**2) Present Address:**

**Postcode:**  
**Telephone:**  
**Mobile:**  
**Email:**

**3) Name you wish to be known by:**

**4) Passport Information:**  
**Your full name (if different from 1)**

**Number:**  
**Nationality:**  
**Place of Birth:**  
**Place of Issue:**  
**Date of Issue:**  
**Date of Expiry:**

**5) Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Age: \_\_\_**

**6) Gender: Male / Female (please circle)**

**7) Emergency Contact**  
**Title: Mr / Miss / Mrs / Rev / Other:**  
**Name:**  
**Relationship to you?**  
**Address:**

**Postcode:**  
**Telephone:**  
**Mobile:**

**8) Are you on any medication? Yes/ No**  
**If Yes, which medication?**

**What is it for?**

**Have you (in the last few years) or are you,**  
**receiving counselling. If so, please explain**  
**on separate paper.**

**What physical disabilities do you have?**

**Do you have any ongoing illnesses?**

**Are you a smoker: Yes / No**

**9) Are you a vegetarian? Yes / No**  
**If Yes would you eat some meat if you**  
**really had to? Yes / No**

**Do you have any food allergies or need a**  
**special diet?**

**If there is anything else you feel we need**  
**to know please tell us on a separate piece**  
**of paper.**

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**10) If you are in the process of applying for a passport, please go ahead and send in the application form so that we can start the application process. You can send in the passport information later.**

**11) Data Protection Agreement**

**By signing below, you agree to relevant parts of your personal data (including sensitive data such as health) being passed to other partners in the mission in connection with your service. Your records will be handled responsibly. We may pass your name, email address and phone number on to other participants going to the same outreach to co-ordinate travel and/or get in touch with one another. You also agree to the use of your photo for further promotion of trips in the coming years.**

**Signed:**

**Date:**

**12) Please explain below how you came to know the Lord Jesus as your personal Saviour. Tell us how long ago this happened to you. Say what you were like before you were a Christian, what you actually did to become a Christian and how the Lord has changed your life since. How long ago did you become a Christian? (use extra sheet if necessary)**

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**13) While in Moldova this summer, you may have to explain the Gospel to someone. What would you say to someone who wanted to know how to become a Christian? (use extra sheet if necessary)**

**14) What are your reasons for going on the trip?**

